

Application No. _____
(to be filled in by the office)



Please duly attested
passport size
photograph

JANKI DEVI MEMORIAL COLLEGE

Sir Ganga Ram Hospital Marg,
New Delhi-110 060

POST APPLIED FOR _____

Please read the notes carefully given at the end before filling the form.

1. Name (in block letters): _____
2. Father's/Husband's Name: _____
3. (i) Date of Birth (in figures): _____
(in words): _____
(ii) Age _____ Years _____ Months(as on date) _____
4. Nationality: _____ Male/Female _____ Married/Unmarried _____
5. Postal Address _____
_____ Pin code _____ Contact No. _____ Email: _____
6. Permanent Address _____
_____ Pin code _____ Contact No. _____ Email: _____
7. Do you belong to Scheduled Caste/Scheduled Tribe or OBC? If so, state the name of the Caste/Tribe and attach a Certificate _____
8. Are you Ex-service man/Disabled Personnel/Development or Defence Personnel Killed in action? If so, attach certificates _____
9. Are you a Physically Handicapped Person? If so, give details _____
10. Have you been debarred or punished for adopting unfair means in any examination by the Institution/Board or University? if so, please specify _____

11. Educational Qualifications:

Examination Passed	Name of the University/Board	School/College Attended	Division with percentage of marks obtained	Year of passing	Subjects offered

12. Are you attending any part-time/full time course of study? If so, state the name of the course and the Institution you have joined: _____

13. Experience, if any:

Office in which worked/working	Designation	Period From	To	Length of Experience	
				Years	Months

14. Indicate the time you will require to join, if selected _____

15. Do you know typewriting/shorthand? If so, state speed:

English Shorthand _____ w.p.m. Typewriting _____ w.p.m.

Hindi Shorthand _____ w.p.m. Typewriting _____ w.p.m.

16. Do you have working knowledge of Computers? If so, give details _____

17. Have you applied for any other post of the college? If so, state the name of the post and date when applied: _____

18. Any other information _____

Dated _____

Signature of the Applicant

Declaration:

I declare that all the statements made in the Application Form are true to the best of my knowledge and belief.

Dated _____

Signature of the Applicant

Forwarded (only for those who are already employed):

The facts stated in the above application have been verified and found correct.

Dated _____

Head of the Dept./Institution
(with seal)

Notes:

1. Attested copies of all relevant certificates, degrees, testimonials etc. should be attached with the application and the originals must be produced at the time of interview and at the time of joining, if selected.
2. Applicants who are in employment should send their application is through their employers.
3. One recent passport size photograph should be pasted on the application form.
4. Incomplete application form will be rejected.
5. No T.A./D.A. will be paid for attending the prescribed tests and interviews.
6. Minimum qualifications and pay scale for the posts advertised are attached with the application form.